

OFFICE OF THE CHIEF OF POLICE

SPECIAL ORDER NO. 4

April 5, 2005

SUBJECT: DEACTIVATION OF ARRESTEE MEDICAL SCREENING FORM, FORM 5.35, IMPLEMENTATION OF THE LOS ANGELES COUNTY UNIFIED ARRESTEE MEDICAL SCREENING FORM, FORM SH-R-422, AND REVISION OF INMATE CLASSIFICATION QUESTIONNAIRE AND RECORD OF MEDICAL SCREENING (BLUE), FORM 5.36.0

PURPOSE: The Department requires arresting officers to complete an Arrestee Medical Screening Form, Form 5.35, for each arrestee who is booked and detained in a Department jail facility or a County jail facility. This form is similar to a form used by the Los Angeles Sheriff's Department (LASD) when processing arrestees transferring to LASD custody. To reduce paperwork and provide greater efficiency for arresting officers, this Order deactivates the Arrestee Medical Screening Form, Form 5.35, and implements the Los Angeles County Unified Arrestee Medical Screening Form, Form SH-R-422. This Order also revises the Inmate Classification Questionnaire and Record of Medical Screening (Blue), Form 5.36.0.

PROCEDURE:

I. ARRESTEE MEDICAL SCREENING FORM, FORM 5.35 - DEACTIVATED.

The Arrestee Medical Screening Form, Form 5.35, is deactivated. The discontinued Form 5.35 shall be marked "obsolete" and placed into the divisional recycling bin.

II. LOS ANGELES COUNTY UNIFIED ARRESTEE MEDICAL SCREENING FORM, FORM SH-R-422 - IMPLEMENTED.

A. Use of Form. This form is used to document the prebooking medical screening of prisoners.

B. Completion. Arresting officers shall complete an Arrestee Medical Screening Form, Form SH-R-422, for each arrestee who is booked and detained in a Department jail facility or a County jail facility. Completion of the form is not necessary if an arrestee is released immediately on his or her own recognizance, released on a Non-traffic Notice to Appear, Form 5.2.2, or immediately posts cash bail.

1. Completion - Arresting Officer. The arresting officer shall:

- * Indicate the arrestee's name, booking number and date at the top of the form;
- * Complete the "Arresting Officer's Observations" section;
- * Indicate his/her name, serial number, division of assignment, and time of completion in the space provided after question number five; and,
- * Complete the "Jailer's Assessment" section.

Note: Officers shall check the "Yes" box when an arrestee currently has a specified illness or condition. The "No" box shall be checked in circumstances where an arrestee had such an illness or condition in the past, but not currently, that does not require medical treatment.

2. Completion - Detention Officer. The detention officer shall:

- * Verify the accuracy of information on the form and confirm that the arrestee is not in need of medical attention; and,
- * Indicate his/her name, serial number, and time of completion in the space provided following question number 16.

Note: The "Outside Agency Medical Declaration" section and "Watch Sergeant Notification" signature block are not applicable and shall be left blank.

C. Distribution.

1 - Original, attached to prisoner's Jail Custody Record

1 - TOTAL

III. 5.36.0 INMATE CLASSIFICATION QUESTIONNAIRE AND RECORD OF MEDICAL SCREENING (BLUE), FORM 5.36.0 - REVISED. The Inmate Classification Questionnaire and Record of Medical Screening, Form 5.36.0, has been revised to reflect the following:

- * The "Inmate Classification Form Completed By" field has been relocated from the bottom of the form to the lower portion of the "Segregation Assessment" section; and,

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- * A signature block has been added for dispensary personnel completing the "Special Medical Instructions for Persons in Custody" section.

The use and distribution of this form have not changed.

FORM AVAILABILITY: The Los Angeles County Unified Arrestee Medical Screening Form, Form SH-R-422, is currently available at all Department jail facilities. The Inmate Classification Questionnaire and Record of Medical Screening, Form 5.36.0, will be available from the Department of General Services, Distribution Center, in about 60 days. Department personnel shall continue to use the current Inmate Classification Questionnaire and Record of Medical Screening, Form 5.36.0, until the revised form is available.

AMENDMENTS: This Order deletes Section 5/5.35 and amends Section 4/620 of the Department Manual.

AUDIT RESPONSIBILITY: The Assistant to the Director, Office of Operations, shall monitor compliance with this directive in accordance with Department Manual Section 0/080.30.

WILLIAM J. BRATTON
Chief of Police

Attachments

DISTRIBUTION "D"